

Woodbridge

CAN TYPHOID FEVER BE ABORTED—
THE ANSWER.

Read in the Section on Practice of Medicine, at the Forty-eighth
Annual Meeting of the American Medical Association, held at
Philadelphia, June 1-4, 1897.

BY J. E. WOODBRIDGE, M.D.

CLEVELAND, OHIO.

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There are departments in medicine of which it may be truly said that "reasoning is deceptive;" in which actual experience gives the only light by which our footsteps may be guided; in which the clinical experience of a single observer, who has been wisely taught and has wisely followed the teaching, is of greater value as evidence of the justness of a conclusion, than is the subtlest reasoning of the most astute logician. This is eminently true of the subject which is presented for your consideration today.

The question which forms the title of this paper can be correctly and forcefully answered only by those who can speak from bedside experience.

The subject has already been fully and ably discussed, every imaginable argument has been adduced to establish a negative, but the force of most of these has already been broken by the silent footfalls of advancing science.

The effect of the antitoxins of diphtheria, the bubonic plague and other diseases, and the discovery of Laveran, that ague is a specific infection in which every drop of blood is invaded by a living organism, coupled with the well known fact that a single dose of one of the least harmful of drugs will not only abort an attack of malaria, but will effectually disinfect the blood circulating in every part of the body, from the tip of the finger to the ball of the toe, emphatically negatives all the arguments that have been advanced to prove that the course of the specific infections can not be interrupted, and especially that typhoid fever will run its course in defiance of all medication; yet these dogmatisms have been quoted,

repeated, reiterated and applauded, as if they contained the very essence of all the wisdom of all the ages, past, present and future. They are not true, but the declaration that typhoid is a curable malady has been for years and is yet nearly always greeted with such "acrimonious and vituperative dissent" that it should not surprise us if the bravest men were to hesitate before reporting cases of "aborted typhoid fever," well knowing that such reports would expose them to the ridicule, invective and brutal sarcasms of those who, lacking their knowledge of the power of anti-septic medicine, receive with derision every allusion to the curative treatment of the specific infections. No wonder then that physicians who cure these diseases are afraid to publish their reports; no wonder that some physicians who promised to send me the clinical histories of their cases have never done so; no wonder that some of my friends, who kindly sent valuable statistics, with permission to use their names in this report, afterward withdrew their consent. The wonder is, that under the circumstances any physician should have had the courage of his convictions and should have dared to allow me to use the data which are here presented. It was, therefore, with extreme diffidence that I wrote to a few physicians who had previously written to me for specific information about this method of managing typhoid fever, asking them for reports of their cases for publication.

But the medical profession it seems is equal to any emergency and there is no demand that can be made upon it in the name of suffering humanity, which it does not immediately supply, as the generous and noble responses that are embodied in this report clearly prove; and despite the fact that the ordinary difficulties which beset the gathering of statistics on any new method of treatment have been enormously augmented for the abortive treatment of typhoid fever by the sharp criticism to which it has been subjected, I present herewith the statistics of 6,911 cases of typhoid fever that have been treated by the

method I have advised, with quotations from the reports of a few of those physicians who have not only had the intelligence to institute scientific treatment, and with it to abort the disease, but have also had the heroism to brave the innuendoes and criticisms of the molders of medical thought, and have supplied the data which must unequivocally place this heretofore most terrible sickness among the curable diseases. In signing these reports they have braved dangers as real as those which confront the soldier on the battlefield, and in speaking out in advocacy of the abortive treatment of typhoid fever they have jeopardized their professional careers, but they have exhibited the true nobility of their characters.

At the last meeting of this ASSOCIATION, the method of managing typhoid fever, which is dealt with in these reports, being under discussion, certain arguments were advanced with the manifest object of detracting from the value of the treatment by showing that the typhoid fever of this country and during recent years, is not the same disease that prevailed here twenty or thirty years ago or that is today so much dreaded in foreign lands. These arguments must have sounded strange to the ears of scientists who regard the bacillus of Eberth as the cause of the disease and who would naturally expect a given cause to produce a given effect under like circumstances. These arguments, aside from being unscientific, are in conflict with well known facts. For example, from 1864 to 1869 there occurred in the Boston City Hospital 152 cases of undoubted typhoid fever, 21, or 13.81 per cent. of which died, while the duration of the illness of those that recovered was 24.25 days. In St. Bartholomew's Hospital, London, 1860 to 1864, there were 244 cases of typhoid fever treated, with 27 deaths, or 10.06 per cent., while in the same hospital during the five years preceding the opening of the discussion of this subject in this Society (1893), 406 cases were treated, with 54 deaths, a death rate of 13.2 per cent. In the Buffalo General Hospital dur-

ing the years 1892-3-4 (the only report to which I have access at present), 271 cases were treated to a finish with 47 deaths or 17.34 per cent. In the St. Louis City Hospital, during the years 1890 to 1893, there were treated 353 cases with 73 deaths, or a death rate of 20.68 per cent. During the years 1889 and 1890, there were treated in the Providence Hospital, Washington, 72 cases, of which 23 died, a death rate of 31.94 per cent. "Murchison places the death rate from this disease at 17.45 per cent., which is perhaps none too high for this city (Washington) during the time mentioned (July 1 to Oct. 31, 1895)." (Dr. Kober in Report of Health Office District of Columbia, 1-95.) It is well known that a few other hospitals have reported lower death rates in a few instances and it is frankly admitted that these numbers are too small to eliminate possible errors, or to constitute a safe basis upon which to found exact conclusions, but so too are those from which are obtained the marvelously low percentages so vociferously acclaimed by a few enthusiastic advocates of cold water. They are large enough, however, for the purpose for which they are introduced—not to antagonize any particular method of managing the disease, but to prove that typhoid fever in this closing decade of the nineteenth century has lost none of its old-time virulence and intractability; that it is still man's most insidious and relentless foe, running as tedious and obstinate a course to as certain death today as it did forty or fifty years ago.

The grave character of typhoid fever being proven we are confronted by several important questions: Can the disease be aborted? Can its course be interrupted? Can its death rate be lowered? Can its grave symptoms be ameliorated? Can relapses be prevented? Can complications be averted? In other words, is typhoid fever amenable to medical treatment? For answer I submit the following reports and in making the estimation of the value of the statistics, I beg you to remember that the physicians who

have presented them were applying a method which was not only new to them, but which embodied practices that so far contravened all accepted theories, that many hesitated and did not dare, all at once, to throw away the old and fully adopt the new plans.

FRANCIS M. GREEN, M.D., Lexington, Ky., May, 1897:—I have treated in all thirty cases and without a single death. I aborted the disease in several cases, the temperature reaching normal by the seventh to ninth day. In the JOURNAL some time since I alluded to the ignorant and unjust criticism of the method. It is unfair in its enemies to cry out against our diagnosis without having first tried the treatment in cases which they themselves have pronounced typhoid fever. It is sufficient that the treatment will prove successful in a large majority of cases when commenced early.

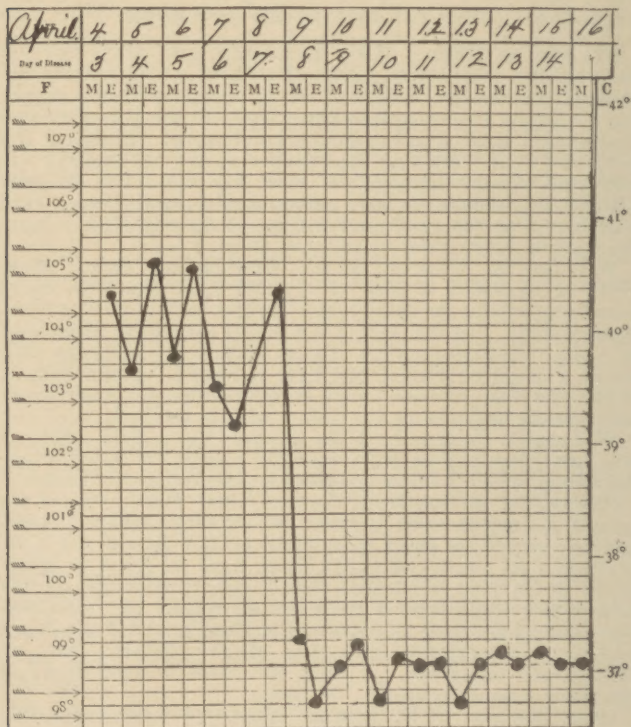
WILLIAM M. WRIGHT, M.D., Huntington, Tenn., May, 1897:—I approach a case of typhoid fever now with more confidence than ever before, and I attribute it to your method of treatment. To say that I am highly pleased at being able to make favorable mention of your method to physicians with whom I come in contact but puts it lightly. I tell them it is now the *sine qua non*. I am an unqualified advocate of and enthusiastic believer in the virtue of this method.

WALTER N. SHERMAN, M.D., Merced, Cal., May, 1897:—I also use your tablets with splendid results in many other diseases in which I think intestinal antiseptics are indicated.

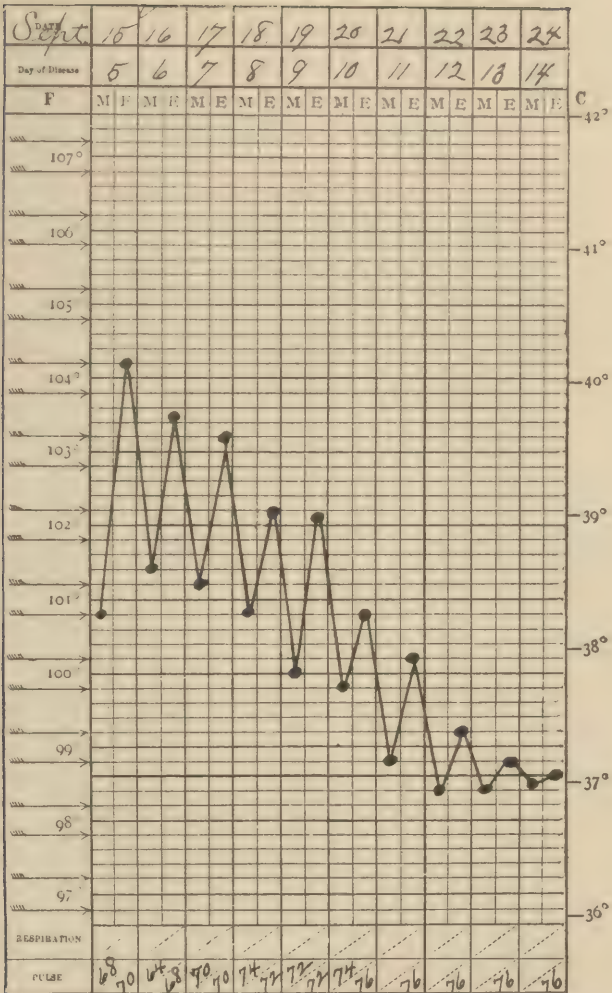
SAMUEL W. HOVER, M.D., Fayette, Ohio, May, 1897:—I am sorry I can not give you a fuller report of my cases, but if I had any number of cases of typhoid fever I should use your treatment on every one. My cases have all done so much better under your treatment that I have practically all the field in this neighborhood and for all ailments. My worst case was an old lady aged 71 years and she had a very bad attack with all characteristic symptoms of the disease. No one thought she could live. I broke the fever in nine days and she made a rapid recovery. Six cases.

CARL BONNING, M.D., Detroit, Mich.:—I treated only two patients suffering from typhoid fever by your method. The first was an old lady nearly 60 years old, who was treated according to your method from the beginning. This was a mild case of true typhoid fever which ran its usual course of twenty-one days, with good recovery. The second case was a boy 14 years old, treated by your method from the first day. The symptoms became worse from day to day, temperature rising constantly and going up to 105 degrees F.; evacuations very frequent. On the ninth day a severe hemorrhage of the bowels set in, when I stopped your treatment at once, as I could not help but think that the treatment was the cause of

his early and severe hemorrhage. The boy finally recovered under different treatment, though he was confined to his bed for six weeks more. Since then I have not given your treatment another trial.



Dr. Wm. H. Arthur, Fort Myer, Va. Patient John L., Fort Myer, aged 15 years; admitted to hospital April 4, 1896; diagnosis, typhoid fever. Previous history: Patient treated for intermittent fever for three days. April 4 and 5 delirium continued, quinin stopped, resisted all treatment. April 6, modified Woodbridge treatment commenced. Patient slept all night. April 7, no delirium. April 8, guaiacol added. April 12, all treatment stopped, liquid diet. April 14, ordinary diet resumed. Modified Woodbridge treatment consisted in multiplying dosage and dividing intervals by four. Patient's sleep never disturbed, but treatment resumed immediately upon awakening. Guaiacol carbonate was not on hand at first. It was procured and added on April 8. Persistent delirium of a very obstinate and exhausting kind was unaffected by chloral. Disappeared as soon as evacuations of bowels became free and frequent.



HENRY CLAY DALTON, M.D., St. Louis, Mo., May, 1897:—I have treated eleven cases by the Woodbridge method, in fact all cases that I have had since I have commenced the treatment, because I certainly would not now treat that disease by any other method. All the patients recovered. None of the cases had any complications or sequelae. With the exception of one case the tendency of the fever was to steadily abate. In the exception referred to the temperature became higher for two days after the commencement of the treatment, in fact the temperature increased two or three degrees. At the end of the second or third day it fell to about 102 degrees and in less than a week was entirely gone. In none of my cases was there delirium or tympanites. Dr. Simon Pollak of this city, at my suggestion, treated his son after your method. He was delighted with the treatment. I feel that you have a grand treatment of the disease and that it is the duty of every physician to use it. Certainly up to the present time there is no remedy which approaches it in efficiency. My experience is somewhat limited, but in the cases in which I have used it patients have gotten along most comfortably and the disease has been cut short. Eleven cases; no deaths.

J. W. R., M.D., Missouri, May, 1897:—I think there is nothing like "Woodbridge treatment for typhoid fever." I have had the best results in every instance, with no deaths.

CHARLES S. JAMES, M.D., Centerville, Iowa, May, 1897:—I have been using the Woodbridge treatment for a considerable length of time with very satisfactory results.

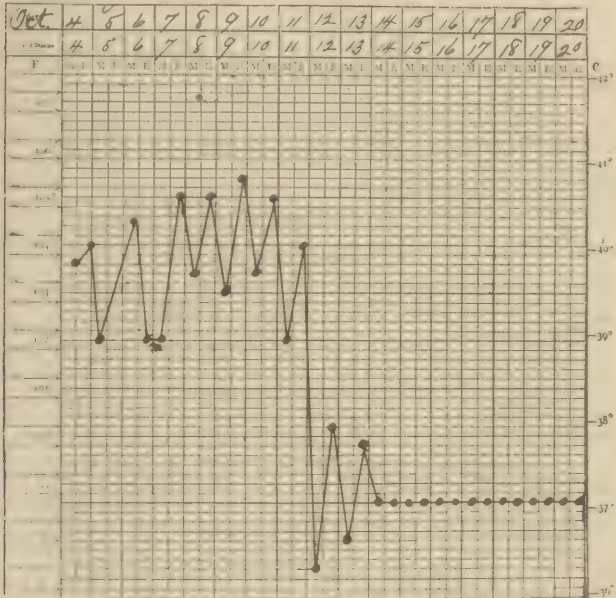
BENJAMIN MOSBY SMITH, M.D., Davis, W. Va.:—I have the first case to lose since I adopted your treatment two years ago. The great trouble is physicians do not use the treatment as they should or as directed. I am with you heart and soul and feel certain it is the only sure treatment we have now.

EDWIN O. BOARDMAN, M.D., Overton, Neb., May, 1897:—I have treated thirty six cases by your method. The first ten cases were not so successfully treated as were the later ones, because of two facts: 1, the medicines were not properly prepared; 2, they were not properly given. Since then I have used the tablets prepared by P. D. & Co., without a single death, my two deaths occurring among the first ten. One of these was complicated with an old heart lesion—a woman 45 years old; the other a boy of 8, died of purpura hemorrhagica ten days after the subsidence of the fever.

FRANK C. MYERS, M.D., Kalamazoo, Mich., May, 1897:—I have been very much pleased with your treatment and have used it faithfully for two or three years, in fact I was the first to use it in this city. I have read two or three papers in its favor at our Kalamazoo Academy of Medicine.

ROBERT J. HILL, M.D., St. Louis, Mo., May, 1897:—I have so thoroughly adopted your plan of treating typhoid fever and typhoid conditions that, judging from my past experiences, I

have no more typhoid. I do not allow the disease to go so far but that when I meet a case which I think from the past history might run into it I immediately go for Woodbridge. I have no deaths and no protracted cases. I have placed my genuine cases at fifteen. I have no doubt the number would run much higher, but as I said before, all cases of a suspicious character are at once put on that treatment. I have seen much benefit from your plan in cases of septicemia and even in fermentative dyspepsia.



Dr. W. R. Kelly, Watonga, Oklahoma. Goldie S., aged 14, female, admitted Oct. 1, 1895; diagnosis, typhoid fever. October 4, began treatment on fourth day of disease. Temperature below normal October 12, up to 100 on 12th, normal on 14th. Gave sponge baths and phenacetin to control excessive temperature.

BYRON I. PRESTON, M.D., Rochester, N. Y., May, 1897: I regret that my first cases were not properly recorded but they were apparently aborted five of them inside of ten days. They all had nose bleed, ileac tenderness, tympanites, diarrhea and the usual temperature of typhoid fever at first.

(GEORGE M. ATWOOD, M.D., Haverhill, Mass.: I never saw patients with typhoid have so few unpleasant symptoms as these had after once getting down to business with the bowel.

WILLIAM A. JARNAGIN, M.D., Atlanta, Ga., May, 1897: I am perfectly satisfied with the rationale of the Woodbridge plan. Unless my experience is very different from what it has been heretofore, I will adhere to the treatment in the future. I believe this treatment is the best—it certainly appeals to common sense.

JOSEPH A. DANIEL, M.D., Davenport, Iowa, May, 1897:—Should I be unfortunate enough to contract typhoid fever I should want to be treated by your method.

DONALD MACREA, M.D., Council Bluffs, Iowa, June, 1897:—I learned the value of the Woodbridge treatment of typhoid fever soon after reading your first paper before the AMERICAN MEDICAL ASSOCIATION. Since then I have used it in all cases of typhoid, indeed in all cases of continued fever, both in hospital and private practice. I do not know how many cases I have used the treatment in nor have I any charts—I am not methodical enough for that—but I must have used it hundreds of times. I not only depend on the Woodbridge treatment myself, but I have spoken so strongly in its favor before medical societies, holding out such bright and sanguine hopes of recovery, that it is very generally used in these parts. I have never had a death since using the treatment. The duration of the disease does not seem to have been particularly shortened but the course is modified to such a degree that instead of wearing anxiety and constantly doubtful prognosis, my visits seem to be almost unnecessary and the case smoothly runs along. The only objectionable feature in the treatment is that the patient becomes tired of the bed and of being half sick.

ISAAC A. MCSWAIN, M.D., Paris, Tenn., May, 1897: The method suggested and urged by you has contributed greatly toward the limitation and alleviation of typhoid fever, and while I have seldom been able to use the exact formula of your prescriptions, yet your pointed arguments in favor of the anti-septic plan have been convincing and have caused great changes in the management of this dreaded disease. I have also used your No. 3 alone, and have been gratified with the results.

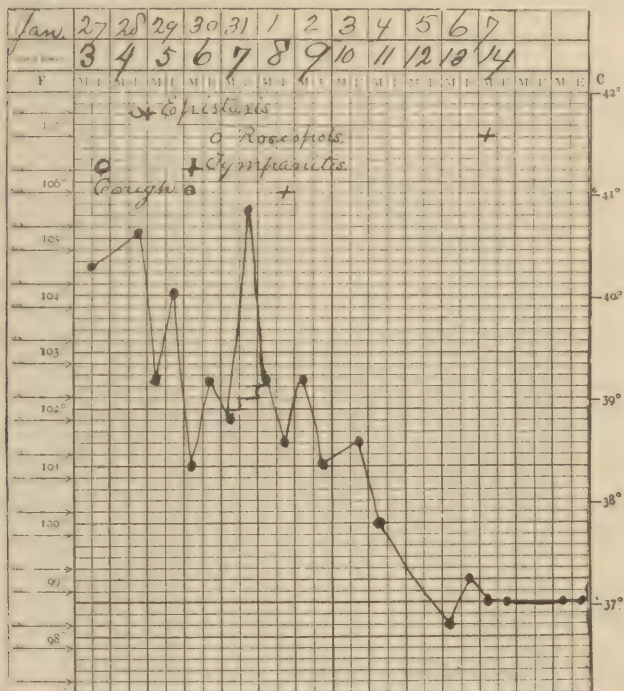
GEORGE W. LONG, M.D., Graham, N. C., May, 1897:—I have also tried the method in several cases of malarial fever with very satisfactory results (following up, of course, with quinin, etc.). At first I was much prejudiced and very slow to make the venture. Since my limited experience I feel emboldened to try the treatment further.

HENRY G. CRUMP, M.D., Seddon, Ala., May, 1897:—I have given your treatment a test in some cases of typhoid fever, and as far as my experience goes I think it will do all you claim.

W. H. NIXON, M.D., Killeen, Texas, May, 1897. My uniform success has turned me from a "doubting Thomas" to a true believer. Let the physician stop and think and give the treatment a fair trial and, reasoning from my own experience I think he will be more than pleased with the result.

T. M. L., M.D., Virginia, May, 1897:—I must say that I am thoroughly convinced of the efficiency of your treatment and expect to continue its use until I find some other that is better.

MATTHIAS BORTZ, M.D., Cleveland, Ohio, May, 1897:—I have been using your system, antiseptic and eliminative, for several years, during which time I have lost no patient.



Dr. Wm. A. Morriam, Struthers, Ohio. John McE., Struthers, Ohio aged 14; admitted January 27, 1897. Reaction of serum on Eberth bacilli positive.

HENRY W. LATHAM, Latham, Mo., May, 1897:—I have been using "Woodbridge treatment" almost exclusively during the past four years; the longer and the more faithfully I apply it, the better I like it. I would be glad, and I am sure that it would be a great blessing to humanity and an honor to yourself if you would compile your ideas and experiences of the nature and treatment of typhoid fever in book form. For the principle of intestinal antisepsis is neither understood nor

appreciated by one hundredth part of the profession, and after an experience of twenty-five years I admit that I groped in the dark, with no definite idea of the treatment of that terrible fever, until I got it from your writings.

OLIVE E. WORCESTER, M.D., Conant, Fla., June, 1897: I used the "Woodbridge treatment" of course, . . . excellent recovery.

ALFRED WOODHULL, M.D., Denver, Colo., May, 1897:—One serious case came under my knowledge last year in which, partly by my suggestion, the treatment was attempted. The beneficial effects hoped for did not immediately follow and after a somewhat prolonged trial it was abandoned. The case ultimately recovered, although the illness was very grave and prolonged.

R. E. SEVIER, M.D., Liberty, Mo., May, 1897: Not one case in which I had a fair chance died.

D. Y. STEM, M.D., Slidel, Texas, May 1897:—I was gratified with the results obtained. All the literature that I had received to this date failed to outline your treatment as recommended in your recent work on typhoid fever; so, at first, I feared to give up all of the older methods and rely strictly on yours. Had I followed your instructions in full I believe I would have shortened the disease in all these cases. While your treatment is adverse to all taught in the standard works that have been examined by me, I feel now that it is the ideal treatment and that it will be a boon to suffering humanity. I wish to congratulate you on the marked success you have had in the treatment of typhoid fever and to praise the untiring energy you have manifested in trying to thwart a disease so much to be dreaded.

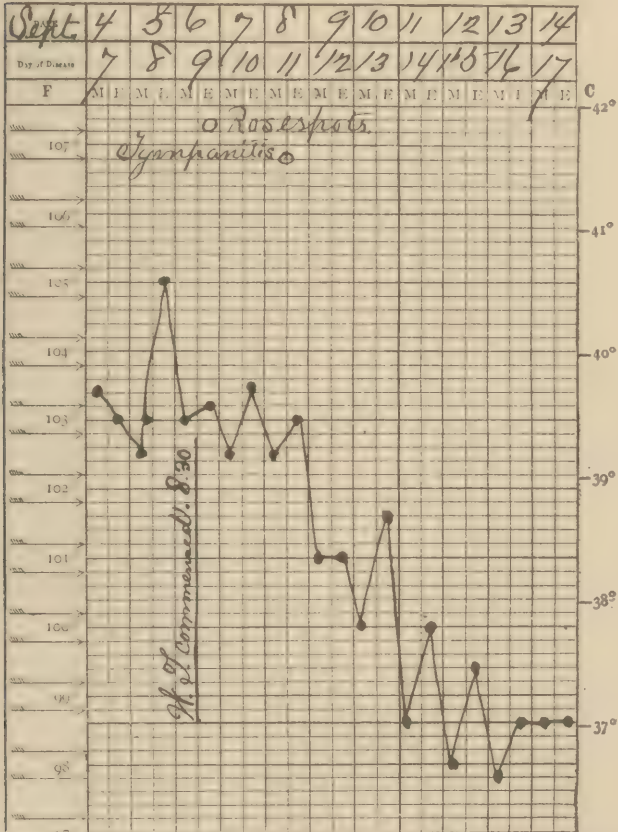
RICHARD S. MARTIN, M.D., Stuart, Va., May, 1897:—I shall continue to use it in all of my cases, as I am highly pleased with the results. I am confident that it is far superior to any other known treatment.

WILLIAM C. HUMPHRIES, M.D., Acworth, Ga., May, 1897:—I am a strong advocate of the "Woodbridge treatment" of typhoid fever. I am sure the mortality would be *nil* if the cases were seen in time and the treatment begun early and used persistently. I think it is intestinal antisepsis *par excellence*. I am a thorough convert to the method.

ARTHUR L. WILLIAMS, M.D., Hot Springs, Ark., May, 1897:—I have also used this treatment in diseases not recommended by you—malarial cases where the patient seemed to be drifting into malarial fever—general malaise, etc. Last fall my wife had all the premonitory symptoms of typhoid fever; nothing seemed to do her any good. I gave her your tablets and in a week she was on the way to recovery, and soon was all right. Many similar cases have occurred in my practice and I have been delighted with the results.

JOSEPH H. GREEN, M.D., Decatur, Ga., May, 1897:—I have

been treating fevers in general by your method since last June. Several of the cases were seen for the first time in the second and third weeks of the disease, and while they ran on for two or three weeks longer, yet their symptoms were very much ameliorated and they were made comfortable and all terminated in a happy recovery.



Dr. John E. Wood, Maysville, Ohio. Patient, Walter Wood; admitted September 4, discharged September 14. Diagnosis, typhoid fever.

WILLIAM P. PIERCE, M.D., Hoopetown, Ill., May, 1897: In the fall of 1895 I was called by the attending physician to see

a young man, 20 years of age, dying of typhoid fever. I had been hearing for several days that his death was expected at any time and that the case was deemed hopeless. I found the patient unconscious, cyanotic, his heart beats 150, pulse at the wrist not to be detected, skin cold, and bathed in a clammy sweat, teeth loaded with sordes, low muttering delirium, restlessness and extreme jactitation, stools passing unnoticed into the bed, bowels tympanitic. The patient could not swallow. The room was filled with a sickening, cadaverous odor. We put one tablet of Woodbridge No. 1 in his mouth every fifteen minutes. He was soon able to swallow and took the tablets every fifteen minutes all night. He continued to improve—the Woodbridge method was fully carried out with almost marvelous effect, the patient slowly but regularly convalesced and in two weeks was discharged.

RAY W. GREEN, M.D., Worcester, Mass., June, 1897:—My cases are hardly worth reporting as, in the majority of cases, the treatment was not begun early. While I have not seen any cases aborted by your treatment, I am confident that the course of the disease was modified favorably, and the convalescence rapid.

VILAS E. LAWRENCE, M.D., Ottawa, Kan., June, 1897:—The disease has lost much of its dread to me. My patients begin to improve in one or two days after beginning treatment and all the symptoms die away except the fever, which gradually disappears. Most of my patients wanted more milk than I thought best to allow them. I discovered that the secret lay in giving medicine energetically and keeping the bowels well open all the time.

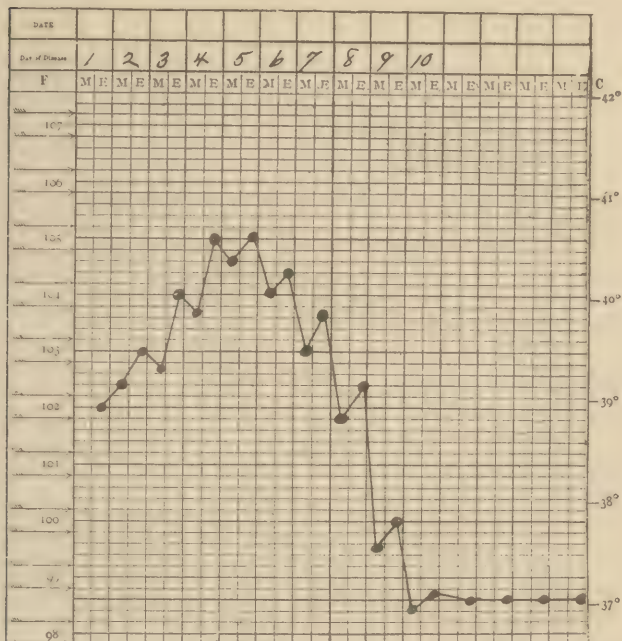
F. MARION KENT, M.D., Spring Valley, June, 1897:—I first used your method of treatment in a number of cases three years ago. My results were much better than formerly, but I did not succeed in aborting but a few of the cases. One death occurred. Since then I have been using your treatment and have had very good results—no death in three years. My results in the first cases may have been due to impurity of drugs or improper administration of the same.

WILBERT B. CLARK, M.D., St. Louis, Mich., June, 1897:—One of my patients was in a family where there were two others sick with the same disease, and treated by other physicians, and both of these terminated fatally.

GRANVILLE MACGOWEN, M.D., Los Angeles, Cal., June, 1897:—I have treated a few cases by your method and have been pleased with results. None of the cases died and none relapsed.

EPHRAIM J. MCCOLLUM, M.D., Tiffin, Ohio:—If any other doctor has had better success than I have reported, I should like to hear from him. I have been called into families where other physicians have suspected typhoid—that shows the faith of our community in the Woodbridge treatment and in those whom they know have been successful in the use of the same.

CLYDE W. CRUMLINE, M.D., Lone Pine, Pa., June, 1897:— I feel we owe a great debt of gratitude to you. My individual experience is limited, but I followed your directions faithfully. Not a dry tongue, no tympany, no "head symptoms," and in fact not a thing that I did not wish to see after the first twenty-four hours of treatment. There was no question about the correctness of diagnosis.



Dr. John F. McGarvey, Loraine, Ohio. Patient, Walter Stang, aged 18 months. Admitted March 2. Recovered. Woodbridge treatment. This was a typical case and all his friends said he would die. I said he would live.

PERLEY P. COMEY, M.D., Clinton, Mass., May, 1897:— I have used your treatment in every case and feel perfectly satisfied with it. It is a sure thing and I advise it in all cases.

WILLIAM S. SMITH, M.D., St. Clair, Minn., June, 1897:— I do not hesitate to say that this treatment is by far the best yet devised for treating typhoid fever. In my hands it has yielded better results than the enthusiasts of other methods have claimed for their favorites.

EDWARD L. BAKER, M.D., Indianola, Iowa, May, 1897 :—While I have not aborted cases, the comfort from absence of delirium has been marked and recovery after intestinal hemorrhage has taken place—before, such cases have died in my hands.

WALTER W. L. OVERFIELD, M.D., Forreston, Ill., May, 1897 :—Prior to November, 1896, I treated my typhoid patients by the older methods, but I am now convinced that the treatment advised by you is far superior to any heretofore in use.

T. W. S., M.D., Virginia, May, 1897 :—Although I varied the method slightly, I consider it the only treatment to use.

LORENZO D. RAY, M.D., Blakesburg, Iowa, May, 1897 :—I remember one case, a very severe one, of a man who drank to excess. The symptoms were grave; the prognosis of consulting physicians was sure death. After consultation I began your treatment, improvement began inside of eighteen hours and his recovery was uneventful. He was married, 58 years of age—a hard worker and a harder drinker. This treatment has worked exceedingly well for me in all cases especially of men who are inveterate drinkers.

MATTHEW K. ELMER, M.D., Bridgeton, N. J., May, 1897 :—In one case it cut the disease short, but in the others, while I thought it made the cases lighter, the cerebral symptoms less severe and the patients easier in every way, and they ran a very mild course, the duration of illness was about the same as usual. However, it is a great satisfaction to have these clear minds and mild symptoms.

JAMES A. LIFFERTY, M.D., Concord, N. C. :—I am well pleased with the treatment.

MILTON C. CONNOR, M.D., Middletown, N. Y., May, 1897 :—I have used the treatment, with my own modification, in every case that has come under my care for the last three years. Some cases relapsed from stopping the treatment too soon.

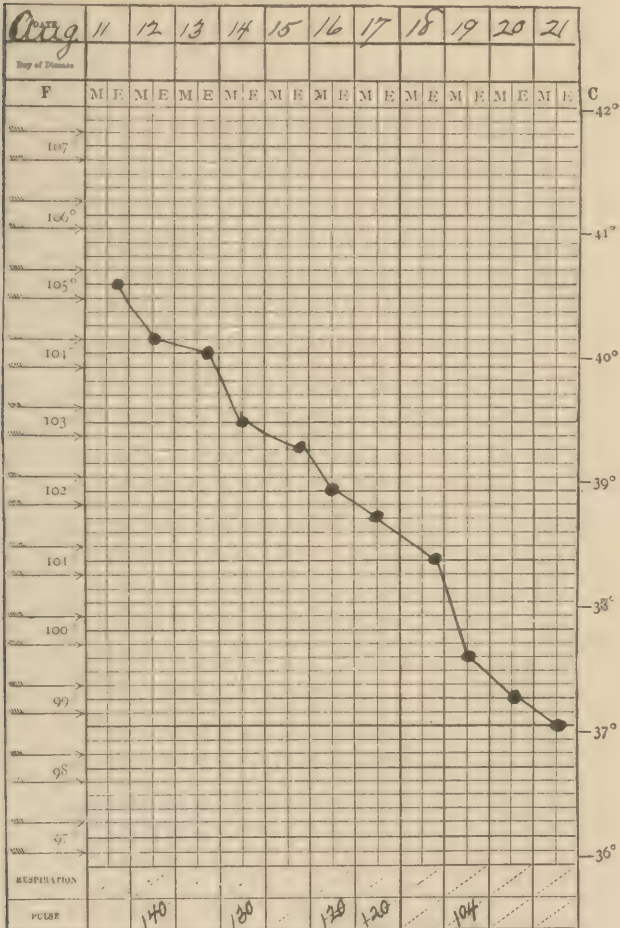
J. B. TAYLOR, M.D., Broadway, Ohio, May, 1897 :—I believe the Woodbridge treatment is the best we have for typhoid fever. Hereafter I shall adhere strictly to your plan. All of my cases recovered, the average duration of illness being about seventeen days. I am perfectly satisfied that I was not energetic enough in the beginning. One point in particular I noticed, that while giving the treatment the tongue and teeth remained clean, the first being moist and the latter free from sordes; and there is also less distension of the bowels.

COLUMBUS N. UDELL, M.D., Blakesburg, Iowa, May, 1897 :—This treatment is all right.

STEWART ROBINSON, M.D., Alleghany, Pa., May, 1897 :—I had no relapse under this method—one case was tedious but finally made a complete recovery.

JOSEPH O. YOST, M.D., Youngstown, Ohio, May, 1897 :—Deaths? No, indeed! I would feel guilty of an unpardonable sin if I failed to use the "Woodbridge treatment" in typhoid fever or in fact in any intestinal trouble of bacterial origin.

WARREN C. EUSTIS, M.D., Owatonna, Minn., May, 1897:
I had one relapse but a return to your treatment prevented complications and in two weeks the patient was again convalescent.



Dr. J. P. Matthews, Carlinville, Ill. Admitted August 11, 1895.

LOWELL M. GATES, Scranton, Pa., May, 1897 :—I have faith in the method but think it might be improved. I do not like to give medicine every fifteen minutes, so have given two every hour. If double the strength, it would not require so many tablets. The principle of intestinal antiseptics, combined with elimination of the septic material in the intestinal tract is doubtless the correct one in the treatment of typhoid fever. It has the advantage over the Brand method in being more reasonable. To treat by the Brand method alone is as unscientific as to treat the fever of an abscess by the same method without opening and washing out with an antiseptic solution.

JOSEPH E. BUNDY, M.D., Cissna Park, Ill., May, 1897 :—We had an epidemic of rather a malignant type and I began treating typhoid in the usual way and lost two out of eight patients. Not satisfied with this I began with your antiseptic treatment and did not lose another case out of twenty. In these cases all of the symptoms were pronounced, and in those in which there was hemorrhage it was slight. I am satisfied that under your treatment most cases can be saved if seen in time.

ALOYSIUS G. BLINCOE, M.D., Bardstown, Ky., May, 1897 :—I have never before seen eight successive cases of typhoid fever do so well.

C. W. FOSTER, M.D., Woodfords, Maine, May, 1897 :—I have used your treatment with most satisfactory results, and shall use it again if I have occasion.

GEORGE W. HALL, M.D., Saint Louis, Mo., May, 1897 :—We were much pleased with the effect of the remedies used. I believe that your treatment, modified to suit the requirements of individual cases, will be the treatment of the future in typhoid fever, and I feel that we owe you many thanks for directing the profession to the efficiency of "intestinal disinfection" in this disease. If we except the use of turpentine by Wood, and the use of nitrate of silver by Dr. J. K. Mitchell, to you belongs the honor of directing the attention of physicians to the intestinal canal as the place to which the main treatment should be directed.

C. RICHTER, M.D., Ashland, Wis. :—Most of my patients were in St. Joseph's Hospital, Ashland, Wis., and the charts are in the possession of the Sisters there. I have treated thirty cases and had two deaths. One of these had been treated by a druggist for two weeks while ambulatory drastic purgatives were given followed by salts : when the man fell into my hands he was in a precarious condition. The outraged intestinal mucous membranes responded by copious watery discharges, later by hemorrhages. There was an enormous tympanites and consequently and partly dependent on this, a weak heart's action. The Woodbridge treatment did not improve his condition and another hemorrhage ended the case fatally.

The second fatal case was of a nervous temperament. His wife and parents of a like disposition, proved a decided stum-

bling block to any rational treatment. Dr. G. W. Harrison, who treated the case, falling ill, I attended the gentleman. I remember that I predicted to Dr. Harrison a fatal termination of the case. His pulse was fast—120 to 125. His nervousness and restlessness were excessive, his general physique was anything but robust. I saw him about the second week of the disease. In his case I have the strongest reason to believe that the treatment was not properly carried out, from the mistaken kindness of wife and parents, who positively refused to awaken him to give the medicines. His life ebbed away by hemorrhages in the third week. Yet in his case, I noticed some of the symptoms—or rather the absence of the symptoms usually met with in typhoid fever under this treatment and of which in a general way I shall speak later. I consider both of these cases for obvious reasons as not properly to be classed under the head of those patients in whom I exhibited the Woodbridge treatment: however, I desire to be unbiased in the matter and consider it my duty to mention these cases and something of their history to you. Outside of these cases I have had no death while using the Woodbridge treatment in typhoid fever. My observations while treating typhoid fever patients with the Woodbridge treatment show that the disease has run a much shorter course than usual in typhoid fever. In several cases, fever stopped on the fifth and sixth day. Tympanites was entirely absent in all cases, after commencing. The stools, usually two in number during twenty four hours, while soft, were not diarrheic nor very offensive. There never was a diarrhea with the characteristic pea-soup stools, but the discharges were rather of a pultaceous nature. There was entire absence of distressing nervous symptoms—no severe headaches, no jactitation, no complications, no excessive thirst. In fact I base my recommendation of this treatment more upon its beneficial influence in abating these symptoms, than in particularly aborting or cutting short the attack, although it certainly has done so in several of my cases. My patients appear to me never to be very sick while under this treatment. The general clinical aspect of the disease was entirely changed and I say this after having seen and treated hundreds of cases of typhoid fever.

These are a few brief quotations from the reports of 193 physicians who have treated (since their previous report, or since they commenced the use of the treatment) 2,078 cases, with forty-five deaths. All of these reports have been received since I presented my paper to the Ohio State Medical Society on May 21, 1897, which gave the statistics of 5,449 cases and 105 deaths, all that had been reported to that date.

The statistics now show 7,827 cases treated with 150 deaths, a death rate of 1.91 per cent. This includes every death known to have occurred under the treatment, or any modification of it. Several deaths in which the treatment was known not to have been properly applied, a large number in which the treatment was not commenced until after the patient was moribund or practically so, and eleven in which the patient was so near the end when the treatment was commenced that death actually occurred within from eighteen to forty-eight hours, and a few cases in which the death was not due to typhoid fever or its sequelae, are included. In only seven of the fatal cases do the reports show that proper treatment was instituted on or before the eighth day of the disease.

The average duration of illness in the 4,935 of the cases which recovered and in which it was given, was 12.7 days. Of the cases that recovered, 101 had intestinal hemorrhage. Ninety-five relapses are reported. Forty-seven were pregnant women, of whom two miscarried and died, six miscarried and recovered, and thirty-nine carried their children to full term, two giving birth to twins. In every instance in which the condition of the child is mentioned it is described as "fine," or "healthy," or "fine and healthy." Forty cases were complicated with pneumonia and recovered.

In 85 of the fatal cases the cause of death is given, 12 being due to intestinal hemorrhage, 14 to perforation, 10 to pneumonia. Six of the deaths are said to have been due to meningitis, 3 to consumption, 3 to Bright's disease, 2 to intussusception, etc. The stage of the disease at which the treatment was instituted is given in 69 of the fatal cases, in 10 of which it was from the first to the eighth day, in 10 from the eighth to the tenth day, in 14 from the tenth to the fourteenth day, in 16 from the fourteenth to the sixteenth day, and in 19 from the sixteenth day to the end of the third week. In 66 of the cases the stage of the disease at which the treatment was commenced is not stated.

These are the statistics and these brief quotations, together with the more than one hundred pages of closely typewritten excerpts from earlier reports presented to the Ohio State Medical Society, on May 21, constitute the verdict of the only jurors who are competent to render judgment, viz.: those who can speak from bedside experience. Among all these hundreds of reports, there appear but twelve adverse critics, not one of whom could possibly have been in possession of any accurate knowledge of the subject, not one of whom had written to me for advice, nor called me in consultation, nor read the one published article in which I have given detailed directions for the management of typhoid fever. At least seven of the twelve, by their own admission, and one other certainly, did not use the treatment as advised, and the remaining five spoke from an experience limited to the treatment of fifteen cases, an average of three cases to each observer. This is an experience altogether too insignificant to justify an adverse criticism.

What are the salient features of this mass of reports of physicians who have broken away from the ideas of the past? These reports show that those who followed the directions given in my book, "Typhoid Fever and its Abortive Treatment," most closely, had the best results and have become the most enthusiastic advocates of the method and, vice versa, those who diverged most widely from the prescribed course met with failures. They show that many dangerous modifications have been made and that some of the deaths are due to these alterations. They show that rapid recoveries have followed its use when first applied at all the different stages of the disease, and even after all hope had been abandoned by the attending physicians who had used other methods, and in several instances after the supervention of alarming intestinal hemorrhage, they show rapid recoveries during the most careless and injudicious use of the most subversive counterfeits of the original prescriptions. They show the administration of such infinitesimally small doses as would

make the most orthodox homeopath blush and of doses the size of which would make the rashest heroic of the past tremble.

Despite these encumbrances, the method of treatment has passed through the ordeal of its first years of trial by both its friends and its enemies, who have treated 7,827 cases with 150 deaths, or a death-rate of less than 2 per cent. and a duration of illness of a trifle over twelve days. Under its benign influence the severity of the disease is greatly ameliorated, the symptoms minified, all grave complications averted and dangerous sequelæ prevented. The tongue is quickly rendered moist, tympanites promptly relieved, excrements lose their offensive odor, delirium is rare and the "typhoid state" unknown. The appetite soon returns and the patient expresses a desire to get up and eat solid food, which he may do if he has been properly treated from a sufficiently early stage so that ulceration of Peyer's glands has been prevented. Tedious convalescence is avoided, the patient generally passing rapidly from the fastigium of the disease to vigorous and robust health. These are results which have never before been obtained in hospital or private practice, in so large a number of cases, by so many physicians. They are results which were never before deemed possible. They have been obtained in most instances, without the use of the cold bath, medicinal antipyretics, or alcoholic stimulants, all of which are generally unnecessary. They prove by incontrovertible evidence that typhoid fever can be aborted. They teach that it is amenable to curative treatment in all of its stages and they go far toward proving that death or protracted illness are wholly unnecessary consequences of the disease.

In conclusion I wish to say that I am deeply grateful to the physicians who have so courtously and courageously responded to my letters of inquiry and in so doing have made it possible for me to submit this report.

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